REPORT ON THE USE OF PROVINCIAL HEALTH GOALS IN REGIONAL HEALTH SERVICE PLANS

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Background

In July 1997, the provincial government approved *Health Goals for British Columbia*. The six provincial goals, 44 objectives, and accompanying indicators for measuring progress are based on the many factors known to influence a person's health. These "determinants of health" include how we live and work (goal 1), our individual capacities, skills, and choices (goal 2), our physical environment (goal 3), and our health services (goal 4). The importance of healthy child development (objective 2.1), Aboriginal health (goal 5), and disease and injury prevention (goal 6) are also recognized. The health goals offer a framework for balancing investment of resources between health care and other important influences on the health of the population.

The Provincial Health Officer is responsible for promoting the provincial health goals and for monitoring and reporting on progress toward their achievement. The multi-sectoral *Advisory Committee on Health Goals for British Columbia* supports this work by providing leadership, strategic direction, and collaborative action to help realize the goals.

In 1999, British Columbia's regional health boards were required to prepare and submit three-year health service plans.[1] While the plans focus on health services, the *Requirements for Health Service Plans* noted the importance of considering the health of the population and the determinants of health as a basis for planning. The *Requirements* document stated that service planning was to be undertaken within the context of government's strategic directions, including the provincial health goals. The submission of health service plans provided an opportunity for the Provincial Health Officer to assess the extent to which provincial health goals are being used in health authorities' operational planning.

Method

Health service plans were reviewed using a check list developed for this purpose. Analysis was carried out by the Office of the Provincial Health Officer and was based on plans submitted to the Ministry of Health and available to the Office as of October 1999.

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[1] In British Columbia, local health authorities include 11 regional health boards (RHBs), 34 community health councils (CHCs), and 7 community health services societies (CHSSs). Regional Health Boards were required to submit their first health service plans by June 1999. CHCs and CHSSs will submit their plans by June 2000. Required components of the service plan are a vision statement, mission, population profile, description of the existing health system, priority issues, three-year goals and objectives, strategies to achieve the objectives, evaluation plan, and communications plan.

Findings

Conceptual Use (political level)

- Most health authorities have vision and mission statements that reflect a broad definition of health and recognition of the factors that influence health.

- Seven of the 11 service plans reference or incorporate the provincial goals. One plan (Capital) indicates that provincial goals have been formally adopted by the region.

Managerial Use (policy level)

- In their Population Profiles, all regions have considered the socioeconomic environment (provincial health goal 1) and health services (goal 4), and most have included data and/or discussion on individual behaviours and skills (goal 2), Aboriginal health (goal 5), and disease and injury prevention (goal 6). The health determinant least likely to be included in the service plan's Population Profile is the physical environment (goal 3).

- In seven of the service plans, the priority issues, objectives, and strategies focus on the delivery of health services (goal 4) and programs that address disease and injury prevention (goal 6). Examples are improving access to services by reducing surgical wait lists, adding extended care beds, or expanding speech and language services. Objectives and strategies are not always clearly linked to the health deficits and desired health outcomes identified in the region's vision/mission statements and Population Profile.

- Four plans (Capital, North Shore, Thompson, Vancouver/Richmond) have specific objectives and strategies addressing broader determinants of health, e.g., cross-sector initiatives on housing or transportation (goal 1), promotion of healthy child development (goal 2), and enhancing water quality (goal 3). Several other regions are beginning to research and plan around these and other goals, e.g., developing a plan for Aboriginal health (goal 5).

Technical Use (practical level)

- Indicators, targets, and a monitoring/reporting system are not yet in place in most regions. Based on their service plans, Capital, Thompson, and Vancouver/Richmond are the furthest along in monitoring and evaluation.

- Several regions have identified accountability, for health system performance in particular, as a priority for the coming years.

Conclusions

❶ Provincial health goals concepts are being used

Based on their service plans, most regional health authorities have adopted a broad definition of health. We believe that provincial health goals have contributed to discussion and understanding of the many factors that influence health and to the adoption of vision and mission statements that reflect this.

Although not all health service plans contain explicit references to provincial health goals, we know that the goals have been used in numerous local planning and accountability activities. Some examples are:

- The Simon Fraser service plan does not specifically refer to provincial health goals. However, the *Simon Fraser Health Region Health Profile* (a separate document) compares regional to provincial goals and uses the provincial goals as its table of contents.
- The South Fraser service plan references the provincial health goals, but does not fully reflect the extent to which the goals have been used in local planning. South Fraser's *Strategic Priorities for Change* notes that the Region has endorsed all of the provincial goals as important and has reviewed its own strategic priorities to ensure they are consistent with the provincial goals framework.
- Several regions did not include data or discussion of the physical environment (goal 3) in their service plan's Population Profile. Yet, Capital and Central Vancouver Island (and perhaps other regions) have produced comprehensive health profiles that include available data on all determinants of health, including the physical environment. For Capital Health Region, goal 3 is one of the Board's "ends" policies, against which results must be achieved or improved.

❷ Use of provincial health goals as a tool for health service planning is just beginning

At this time, about one-third of the regions have gone beyond adopting the broad definition of health to develop concrete policies, objectives, and strategies that are clearly linked to health goals. Thus, although health authorities seem to be on the right track, the use of the health goals to set priorities, target programs, allocate resources, and monitor health outcomes of services provided is still in its early days.

Moving from a high-level vision of health to concrete action and monitoring of results will require continued effort, coordination, and support. Results of this review will be provided to health authorities, ministry staff, and the *Advisory Committee on Health Goals for British Columbia*, with a view to stimulating learning, interest, and collaboration to move the provincial health goals forward as a practical tool for service planning.

❸ Accountability is a priority

There is considerable regional interest in developing indicators, targets, and reporting mechanisms. A common set of indicators, definitions, and baseline data could assist in this regard.

There are opportunities to build on many initiatives related to indicators and reporting, including the *Second Report on the Health of Canadians*, the National Consensus Conference on Population Health Indicators, inter-ministry work on regional socioeconomic indicators, the *Provincial Health Officer's Annual Report*, *Strategic Directions for British Columbia's Health Services System*, and performance measures being developed for the *Ministry of Health Annual Report*. Development and use of a consistent, comparable minimum data set, the basics of which appear to be available through these various initiatives, should be strongly encouraged.

Attachments

- Check list used in reviewing health service plans
- Tables summarizing results
- Health goals and objectives for British Columbia
- Planning framework for health services in B.C.

Check List Used in Reviewing Plans

Use of Provincial Health Goals in Health Service Plans

Conceptual Use (political level)

- ✓ Do the region's vision, mission, and goal statements reflect provincial health goals concepts, i.e., a broad definition of health and recognition of its determinants?
- ✓ Are the provincial health goals specifically referenced or included in the health service plan?
- ✓ Have the provincial health goals been formally adopted by the region?

Managerial Use (policy level)

- ✓ Does the Population Profile consider the broad determinants of health, as evidenced by reference to:
  - living and working conditions (provincial health goal 1);
  - individual capacities, skills, and choices (goal 2);
  - the physical environment (goal 3);
  - health services (goal 4);
  - Aboriginal health (goal 5);
  - disease and injury prevention (goal 6)?
- ✓ Do the priority issues, specific objectives, and strategies make overt references to health deficits, health determinants, and desired health outcomes, as reflected in the provincial health goals? For example, provision of supportive living would fit Goal 1, reduction in low birthweight would fit Goal 2 (a good birthweight is a good start in life), clean air and water would fit Goal 3, etc.

Technical Use (practical level)

- ✓ Are the goals elaborated through indicators for measuring progress?
- ✓ Have targets or benchmarks been set?
- ✓ Is there a system in place for monitoring and reporting on performance?

Developmental steps (conceptual, managerial, technical) are adapted from *Health Policies on Target? A Review of Health Target and Priority-Setting in 18 European Countries*, Harry P.A. van de Water & Loes M.. van Herten, TNO Prevention and Health, 1998.

TABLE 1

Use of Provincial Health Goals in Regional Health Service Plans
B.C. Health Regions, October 1999

Health Region	Are provincial health goals... concepts reflected in the region's vision/mission statements?	specifically referenced in Service Plan?	formally adopted?
Capital	Yes	Yes	Yes
Central Vancouver Island	Emphasis on Goals 4, 6 Broader goals under development	Yes	No
Fraser Valley	Yes	Yes	No
North Okanagan	Emphasis on Goals 4, 6	No	No
North Shore	Yes	Yes	No
Northern Interior	Emphasis on Goals 2, 4, 6	No	No
Okanagan Similkameen	Emphasis on Goal 4	No	No
Simon Fraser	Yes	No	No
South Fraser	Yes	Yes	No
Thompson	Yes	Yes	No
Vancouver/Richmond	Yes	Yes	No

- Most regions have incorporated health goals concepts (broad definition of health and recognition of its determinants) into their vision, mission, and goal statements.
- Seven regions specifically reference the provincial health goals in their service plans.
- One plan (Capital Health Region) states that provincial health goals have been formally adopted by their regional health board.

TABLE 2
Use of Provincial Health Goals in Regional Health Service Plans
B.C. Health Regions, October 1999

Health Region	Are provincial health goals considered in the region's...	
	population profile?	priority issues, goals and objectives, strategies?
Capital	All except Goal 3	Yes, all goals
Central Vancouver Island	All except Goal 3	Primarily Goal 4 Planning activities related to Goal 5
Fraser Valley	All except Goal 5	Goals 4 and 6
North Okanagan	Goals 1, 4, 6	Goal 4
North Shore	All except Goal 3	All except Goal 3
Northern Interior	Goals 1, 5, 6	Primarily Goal 4 Planning activities related to other goals
Okanagan Similkameen	Yes, all Goals	Primarily Goal 4 Planning activities related to Goals 2, 3, 5, 6
Simon Fraser	Goals 1 and 4	Goals 4 and 6
South Fraser	All except Goal 3	Primarily Goal 4
Thompson	Yes, all Goals	Yes, all goals
Vancouver/Richmond	All except Goal 3	All except Goal 3

- In their Population Profiles, all regions have considered the socioeconomic environment (Goal 1). Most Profiles include data on behaviours and skills (Goal 2), health services (Goal 4), Aboriginal health (Goal 5), disease & injury prevention (Goal 6). The health determinant included least is the physical environment (Goal 3).

- Priority issues, specific objectives, and strategies tend to focus on access/delivery of health services (Goal 4), e.g., reducing wait lists. Objectives and strategies are not always clearly linked to the health deficits and desired health outcomes identified in the region's vision/mission statements and Population Profile.

- Capital, North Shore, Thompson, and Vancouver/Richmond regions have specific objectives and strategies addressing broader determinants of health, e.g., cross-sector initiatives on social housing or transportation (Goal 1), promotion of healthy child development (Goal 2), enhancing water quality (Goal 3). Several regions are undertaking planning activities around these and other goals, e.g., developing plans for Aboriginal health (Goal 5).

TABLE 3
Use of Provincial Health Goals in Regional Health Service Plans
B.C. Health Regions, October 1999

Health Region	Are provincial health goals elaborated through...		
	indicators for measuring progress?	targets or benchmarks?	a monitoring system/reports?
Capital	Yes	Yes	Yes
Central Vancouver Island	Not yet	Not yet	Not yet
Fraser Valley	Not yet	Not yet	Not yet
North Okanagan	Not yet	Not yet	Not yet
North Shore	Not yet	Not yet	Not yet
Northern Interior	Not yet	Not yet	Not yet
Okanagan Similkameen	Not yet	Not yet	Not yet
Simon Fraser	Not yet	Not yet	Not yet
South Fraser	Not yet	Not yet	Not yet
Thompson	Yes	Yes	Yes
Vancouver/Richmond	Yes	Not yet	Not yet

- Indicators, targets, and a monitoring/reporting system are not yet in place in most regions. Based on their service plans, the Capital, Thompson, and Vancouver/Richmond regions are the furthest along in this area.

- Several regions have identified accountability -- for health system performance in particular -- as a priority for the coming years.

TABLE 4 Use of Provincial Health Goals in Regional Health Service Plans, B.C. Health Regions, October 1999

	Are provincial health goals...			Are the goals considered in the region's...		Are the goals elaborated through...		
Health Region	Concepts reflected in region's vision/mission statements?	Specifically referenced?	Formally adopted?	Population Profile?	Priority issues, goals and objectives, strategies?	Indicators for measuring progress?	Targets?	A monitoring system/ reports?
Capital	Yes	Yes	Yes	All except Goal 3	Yes, all goals	Yes	Yes	Yes
Central Vancouver Island	Emphasis on Goals 4 and 6	Yes	No	All except Goal 3	Primarily Goal 4. Planning activities related to Goal 5.	Not yet	Not yet	Not yet
Fraser Valley	Yes	Yes	No	All except Goal 5	Goals 4 and 6	Not yet	Not yet	Not yet
North Okanagan	Emphasis on Goals 4 and 6	No	No	Goals 1, 4, 6	Goal 4	Not yet	Not yet	Not yet
North Shore	Yes	Yes	No	All except Goal 3	All except Goal 3	Not yet	Not yet	Not yet
Northern Interior	Emphasis on Goals 2, 4, 6	No	No	Goals 1, 5, 6	Primarily Goal 4. Planning activities related to other goals.	Not yet	Not yet	Not yet
Okanagan Similkameen	Emphasis on Goal 4	No	No	Yes, all Goals	Primarily Goal 4. Planning activities related to Goals 2, 3, 5, 6.	Not yet	Not yet	Not yet
Simon Fraser	Yes	No	No	Goals 1 and 4	Goals 4, 2, 6	Not yet	Not yet	Not yet
South Fraser	Yes	Yes	No	All except Goal 3	Goal 4	Not yet	Not yet	Not yet
Thompson	Yes	Yes	No	Yes, all Goals	Yes, all goals	Yes	Yes	Yes
Vancouver/ Richmond	Yes	Yes	No	All except Goal 3	All except Goal 3	Yes	Not yet	Not yet

Based on analysis of Health Service Plans submitted to the B.C. Ministry of Health as of October 1999. Prepared by Office of the Provincial Health Officer.

Health Goals for British Columbia, approved by the provincial government in 1997:
Goal 1: Positive and supportive living and working conditions in all our communities.
Goal 2: Opportunities for all individuals to develop and maintain the capacities and skills needed to thrive and meet life's challenges and to make choices that enhance health.
Goal 3: A diverse and sustainable physical environment with clean, healthy and safe air, water and land.
Goal 4: An effective and efficient health service system that provides equitable access to appropriate services.
Goal 5: Improved health for Aboriginal peoples.
Goal 6: Reduction of preventable illness, injuries, disabilities, and premature deaths.

Health Goals and Objectives for British Columbia

Mission: To maintain and improve the health of British Columbians by enhancing quality of life and minimizing inequalities in health status.

Goal 1: Positive and supportive living and working conditions in all our communities.

Objective 1.1: Improve and maintain equitable opportunities for employment for British Columbians, by expanding the diversity of the economy and ensuring the sustainability of economic activity.

Objective 1.2: Reduce the concentration of marginalized and disadvantaged groups in lower paying and lower status jobs, and increase social recognition and valuing of jobs at all levels.

Objective 1.3: Reduce the impact of job loss on individuals and communities, for example, through effective industrial adjustment strategies and re-training initiatives.

Objective 1.4: Increase participation in decision-making and reasonable control over work tasks for all types of workers.

Objective 1.5: Improve and maintain quality of life in the workplace, including:

- protection from physical hazards and freedom from harassment;
- policies and supports to help balance work and family responsibilities; and,
- supports for workers with disabilities, chronic illnesses, or other special needs.

Objective 1.6: Improve and maintain appropriate supports and protection for workers in non-standard employment situations such as part-time work, job sharing, home employment, and self-employment.

Objective 1.7: Reduce poverty in British Columbia.

Objective 1.8: Reduce the gap between British Columbians at the lowest and highest income levels, to achieve a more equitable income distribution.

Objective 1.9: Increase the safety and security of communities throughout B.C., including:

- increased sense of personal safety and mutual responsibility for safe communities; and,
- reduced crime and interpersonal violence.

Objective 1.10: Increase opportunities to develop positive and supportive interpersonal relationships and social networks, including:

- access to organized and informal community-based sports, recreation, social, arts, and cultural activities;
- opportunities and supports for voluntary activities; and,
- access to self-help and mutual support activities.

Objective 1.11: Increase opportunities and supports for healthy family functioning, including:

- education and supports for effective parenting;
- affordable quality child care and other supports for working parents;
- recognition and supports for unpaid family caregivers; and,
- access to self-help and mutual support resources for families.

Objective 1.12: Increase access to affordable housing that meets household needs, with reasonable choice in tenure, building type, and location, including:

- affordability of home ownership for first time buyers;
- sufficient amount and variety of moderately priced rental housing: and,
- affordable and accessible housing options for individuals with low incomes or other special needs.

Objective 1.13: Increase the range of secure housing options and housing stock for people who are homeless or at risk of homelessness.

Objective 1.14: Improve and maintain the design of communities to ensure quality of life for residents, including:

- accessible public places for all persons;
- appropriate transportation infrastructure, including public transportation; and,
- neighbourhoods with appropriate access to services and amenities required for health, security and stability, and protection from hazards that harm quality of life.

Goal 2: Opportunities for all individuals to develop and maintain the capacities and skills needed to thrive and meet life's challenges and to make choices that enhance health.

Objective 2.1: Improve and maintain supports to ensure all young children receive the best possible start in life, including:

- appropriate prenatal and postnatal care;
- effective early childhood nurturing and parenting; and,
- appropriate early childhood stimulation, socialization, and education.

Objective 2.2: Improve and maintain the skills and personal characteristics British Columbians need to participate fully in the social, cultural, and economic life of the province, through learning opportunities and supports to develop:

- a sense of personal effectiveness, self-reliance, and self-esteem;
- skills for acquiring knowledge, thinking critically, solving problems, making informed decisions, communicating effectively, managing life events, and coping with stress;
- awareness of individual rights and a capacity to exercise personal responsibilities as members of society; and,
- a commitment to life-long learning.

Objective 2.3: Improve and maintain the skills and capacities of British Columbians to find productive employment in a competitive labour market, including:

- appropriate employment competencies for youth and young adults, developed within a flexible, accessible formal education system; and,
- capacity of those in the workforce to adapt and respond to changes in skill requirements and labour market demands, through access to education and training opportunities throughout adult life.

Objective 2.4: Improve and maintain individual capacity and supports for making healthy lifestyle choices to enhance personal well-being and reduce health risks by:

- Increasing the percentage of British Columbians who do not smoke;
- Reducing the percentage of British Columbians who use alcohol or drugs inappropriately or excessively;
- Increasing the percentage of British Columbians who regularly participate in healthy physical activity;
- Increasing the percentage of British Columbians who have a healthy diet;

- Increasing the percentage of sexually active British Columbians who use appropriate contraception and safer sex practices; and
- Increasing the percentage of British Columbians who use appropriate safety practices, e.g., safe driving habits, safe participation in sports, protection from over-exposure to the sun

Objective 2.5: Increase or maintain the capacity for independent living of persons who require assistance with activities of daily living due to disabilities or limitations in their physical, mental, social, or emotional functioning, including:

- access to necessary supports and services, including recognition of and supports for family and other informal caregivers, and
- capacity to take responsibility for, or participate in, planning and managing personal supports and services.

Goal 3: A diverse and sustainable physical environment with clean, healthy, and safe air, water and land.

Objective 3.1: Improve and maintain air quality throughout British Columbia.

Objective 3.2: Improve and maintain the quality and safety of water throughout British Columbia.

Objective 3.3: Improve and maintain a sustainable, safe and nutritious food supply for all British Columbians.

Objective 3.4: Improve and maintain the quality of land and soil across British Columbia.

Objective 3.5: Decrease damage to the global atmosphere.

Objective 3.6: Minimize the negative impact of human settlement and activity on the long-term sustainability of natural resources.

Goal 4: An effective and efficient health service system that provides equitable access to appropriate services.

Objective 4.1: Maintain commitment to a health service system that is based on the principles of universality, accessibility, comprehensiveness, portability and public administration.

Objective 4.2: Improve the process of allocating resources for health services across the province, to ensure that it is equitable, understandable, and based on population characteristics and needs.

Objective 4.3: Increase access to services that have been proven cost-effective but are not uniformly or consistently used. Decrease utilization of health services, technologies, and medication which the evidence indicates are inappropriate, ineffective, or over-utilized.

Goal 5: Improved health for Aboriginal peoples.

Although considerable work toward developing objectives and indicators for this goal has occurred, more discussions are still needed. A process to finalize specific objectives and indicators must include the extensive involvement of Aboriginal peoples, and must complement the other processes and negotiations that are underway concerning Aboriginal health, First Nations self-government, and other key issues. Therefore, no objectives or indicators are being presented at this time.

Goal 6: Reduction of preventable illness, injuries, disabilities, and premature deaths.

Objective 6.1: Reduce cardiovascular disease.

Objective 6.2: Reduce breast cancer, cervical cancer, lung cancer, and melanoma skin cancer.

Objective 6.3: Reduce respiratory disease.

Objective 6.4: Reduce or maintain current very low levels of vaccine-preventable diseases.

Objective 6.5: Reduce cases of active tuberculosis.

Objective 6.6: Reduce HIV infection rates.

Objective 6.7: Reduce sexually transmitted diseases.

Objective 6.8: Reduce the incidence and impact of chronic disabling conditions.

Objective 6.9: Reduce unintentional injuries and premature deaths.

Objective 6.10: Reduce injuries and deaths from interpersonal violence and abuse.

Objective 6.11: Reduce deaths from use of illegal drugs.

Objective 6.12: Reduce waterborne and foodborne diseases.

Objective 6.13: Reduce neural tube defects.

Objective 6.14: Reduce the negative impact of mental illness.

Objective 6.15: Reduce suicides.

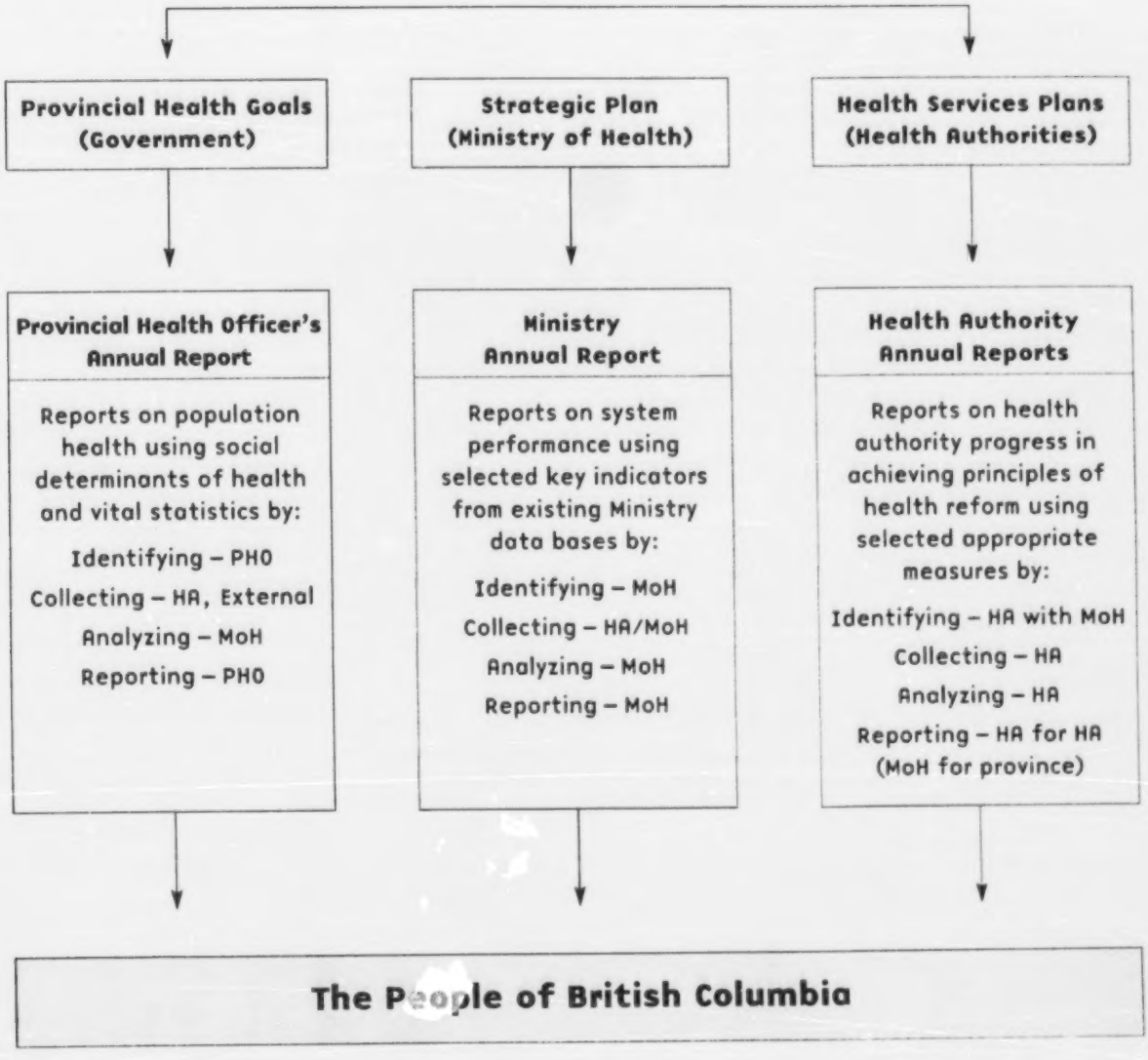
Objective 6.16: Reduce the incidence and spread of infectious diseases, particularly emerging infectious diseases, through improved surveillance.

Source: *Health Goals for British Columbia*. B.C. Ministry of Health and Ministry Responsible for Seniors, December 1997.

Copies of the *Health Goals* document are available from:

Office of the Provincial Health Officer
B.C. Ministry of Health
1810 Blanshard Street, Room 3002
Telephone (250) 952-0876
Facsimile (250) 952-0877
http://www.hlth.gov.bc.ca/pho

APPENDIX B – THE PLANNING FRAMEWORK FOR HEALTH SERVICES IN BC


Provincial Health Goals (Government)
Strategic Plan (Ministry of Health)
Health Services Plans (Health Authorities)
Provincial Health Officer's Annual Report
Reports on population health using social determinants of health and vital statistics by:
Identifying – PHO
Collecting – HA, External
Analyzing – MoH
Reporting – PHO
Ministry Annual Report
Reports on system performance using selected key indicators from existing Ministry data bases by:
Identifying – MoH
Collecting – HA/MoH
Analyzing – MoH
Reporting – MoH
Health Authority Annual Reports
Reports on health authority progress in achieving principles of health reform using selected appropriate measures by:
Identifying – HA with MoH
Collecting – HA
Analyzing – HA
Reporting – HA for HA (MoH for province)
The People of British Columbia

Strategic Directions for British Columbia's Health Service System 1999-2002, p. 17.
Copies available from:
B.C. Ministry of Health and Ministry Responsible for Seniors
1515 Blanshard Street, Victoria BC V8W 3C8
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